See separate instructions.

Part I Reporting Issuer										
1	Issuer's name		2 Issuer's employer identification number (EIN)							
	CI U.S. Equity Co	orporate Class (PI	N/A							
3				e No. of contact	5 Email address of contact					
Duarte Boucinha			416-	-681-1752	dboucinha@ci.com					
6	Number and street (or F	P.O. box if mail is not	7 City, town, or post office, state, and ZIP code of contact							
	2 Queen Street Ea	ast, 20th Floor	Toronto, Ontario, M5C 3G7							
8 Date of action			9 Class	ification and description	I					
Tax Year 2021				Non-taxable distribution						
10	CUSIP number	11 Serial number(s	3)	12 Ticker symbol	13 Account number(s)					
	N/A	N/A		N/A	N/A					
P	-			-	See back of form for additional questions.					
_										
14	I4 Describe the organizational action and, if applicable, the date of the action or the date against which shareholders' ownership is measured for the action ► A non-taxable distribution was made to shareholders throughout the 2021 taxation year.									
					ne return of capital that occurred throughout					
		the 2021 tax	-							
			<u></u>							
15	15 Describe the quantitative effect of the organizational action on the basis of the security in the hands of a U.S. taxpayer as an adjustment per share or as a percentage of old basis 0.24109 per unit									
16 Describe the calculation of the change in basis and the data that supports the calculation, such as the market values of securities and the valuation dates ► N/A										

For Paperwork Reduction Act Notice, see the separate Instructions.

Form 89	937 (12-2	017)			Page 2
Part		Drganizational Action (continued)			
17 L	ist the	applicable Internal Revenue Code section	(s) and subsection(s) upon which the tax tre	eatment is based ▶	• <u>IRC section 301(c)(2)</u> , 312 and 316
18 C	Can any	resulting loss be recognized? N/I	A		
19 P	Provide	any other information necessary to impler	nent the adjustment, such as the reportable	e tax year ►	N/A
Sign			nined this return, including accompanying schedu preparer (other than officer) is based on all inform		
Here	Signa	ture ►		Date►	
	Print	our name ► Darie Urbanky			and Chief Operating Officer
Paid Prepa	arer	Print/Type preparer's name	Preparer's signature	Date	Check if self-employed
Use (Firm's name ► Firm's address ►			Firm's EIN ► Phone no.

Send Form 8937 (including accompanying statements) to: Department of the Treasury, Internal Revenue Service, Ogden, UT 84201-0054